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International Symposium on Gene Therapy
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gtnet@med.unc.edu
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September 11, 1997
Bethesda, MD

1st Gene Therapy Policy Conference
Human Gene Transfer: Beyond Life-Threatening
Disease
National Institutes of Health
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November 22, 1997
San Diego, CA

Sixth Annual Conference on Gene Therapy of Cancer
Sidney Kimmel Cancer Center
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International

September 11-13, 1997
Berlin, Germany

3rd European Conference on Gene Therapy of
Cancer
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October 1-2, 1997
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Current Advances and Future Commercial
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November 21-23, 1997
Milan, Italy

Fifth Meeting on the European Working Group on
Human Gene Transfer and Therapy
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LacZ and Interleukin-3 Expression *In Vivo* after Retroviral Transduction of Marrow-Derived Human Osteogenic Mesenchymal Progenitors

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ABSTRACT

Human marrow-derived mesenchymal progenitor cells (hMPCs), which have the capacity for osteogenic and marrow stromal differentiation, were transduced with the myeloproliferative sarcoma virus (MPSV)-based retrovirus, Ψ MLacZ, that contains the LacZ and neo genes. Stable transduction and gene expression occurred in 18% of cells. After culture expansion and selection in G418, approximately 78% of neo^r hMPCs co-expressed LacZ. G418-selected hMPCs retain their osteogenic potential and form bone *in vivo* when seeded into porous calcium phosphate ceramic cages implanted subcutaneously into SCID mice. LacZ expression was evident within osteoblasts and osteocytes in bone developing within the ceramics 6 and 9 weeks after transplantation. Likewise, hMPCs transduced with human interleukin-3 (hIL-3) cDNA, adhered to ceramic cages and implanted into SCID mice, formed bone and secreted detectable levels of hIL-3 into the systemic circulation for at least 12 weeks. These data indicate that genetically transduced, culture-expanded bone marrow-derived hMPCs retain a precursor phenotype and maintain similar levels of transgene expression during osteogenic lineage commitment and differentiation *in vivo*. Because MPCs have been shown to differentiate into bone, cartilage, and tendon, these cells may be a useful target for gene therapy.

OVERVIEW SUMMARY

We have characterized human bone marrow-derived osteogenic mesenchymal progenitor cells (hMPCs) as potential targets for gene transfer. hMPCs were readily transduced with a myeloproliferative sarcoma virus-based retroviral vector. After *in vitro* selection and expansion of neo^r-expressing cells in G418, the expression of a second unselected gene, LacZ or interleukin-3 (IL-3), was maintained. Transduced, G418-selected hMPCs retained their osteogenic precursor phenotype *in vitro* in a SCID mouse xenograft model of osteogenesis and conditioned high expression of the LacZ gene in osteoblasts and fully differentiated osteocytes. Likewise, hIL-3-transduced hMPCs placed within the same osteoconductive microenvironment, secreted hIL-3 into the systemic circulation. Thus, hMPCs

are a unique cellular vehicle for *ex vivo* gene therapy directed toward mesenchymal tissues.

INTRODUCTION

Bone marrow (BM) is a complex microenvironment that contains at least two stem and progenitor cell populations. The first population consists of hematopoietic stem cells (HSC) and their multipotential progeny, which differentiate into all circulating blood cells of the lymphoid, myeloid, and erythroid lineages. The second progenitor pool consists of mesenchymal progenitor cells (MPCs), which have the capacity to differentiate into a variety of mesenchymal phenotypes, including osteoblasts (Goldman *et al.*, 1991a,b; Nishikawa *et al.*, 1991, 1992; Haynesworth *et al.*, 1992; Prockop, 1997), chondrocytes (Naka-

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Helper virus assays

Supernatants from both vM5LacZ- and vIL-3-SN-transduced NIH-3T3 and hMPCs and serum from mice implanted with vM5LacZ- or vIL-3-SN-transduced NIH-3T3 cells were assayed for infectious virus or NIH-3T3 cells (4 × 10⁵ cells) in the presence of vM5LacZ or vIL-3-SN-transduced hMPCs and were infected 1 week later with 1 × 10⁵ human cord blood derived mononuclear cells to assess the effects of vIL-3 production on human hematopoiesis. These mice were analyzed 2–12 weeks after transplantation. The Mofid/SSA-aid/cell ratio was used because it has been shown to be more permissive to reconstitution with human hematopoietic cells than the SCID strain (Chen et al., 1993).

Reconstituted hematopoiesis of hMPC

hMPCs were grown in DMEM + 30% heat-inactivated (HI) FBS for 18–24 hr following first or second passage to increase cell proliferation and enhance the rate of gene transfer. Preliminary experiments indicated a higher degree of gene transfer when the cells were serum stimulated in 30% FBS than with 20% FBS, but formal comparison with statistical analysis was not performed. Because this is the first publication describing gene transfer into MPCs, there is no available published evidence to compare directly the two FBS preparations. Medium was replaced with 4 ml of (4–5 × 10⁵ cells) vM5LacZ or vIL-3-SN viral supernatant, containing 6 µg/ml Polybrene (Sigma, St. Louis, Missouri). After 6 hr, viral supernatant was removed and cells were cultured in DMEM + 30% HI FBS (which resulted in a higher level of gene transfer than 20% FBS) for 18 hr and repeated daily for 4 days. Cultures of transduced hMPCs were either X-Gal-stained (see below) to determine frequency of vM5LacZ infection and gene expression, or trypsinized and replated at clonal density in G418 to determine the number of clonal cells expressing the proviral gene, or expanded in G418 for further experiments. For all *in vivo* experiments, transduced cell populations, not individual clones, were used.

SH2 monoclonal antibody staining of MPCs

Cultured MPCs were stained with the MPC-specific monoclonal antibody, SH2, as we have previously described (Haynesworth et al., 1992).

X-Gal staining of hMPC

vM5LacZ-transduced or untransduced hMPCs were fixed in freshly prepared 2% formaldehyde, 0.2% glutaraldehyde in phosphate-buffered saline (PBS) for 5 min at 4°C, washed and stained in fresh 1 mg/ml X-Gal in 20 mM potassium ferri-cyanide, 20 mM potassium ferricyanide, and 2 mM MgCl₂ in PBS (Sanes et al., 1986) and counterstained with 0.1% crystal violet (Lemons et al., 1993). To assay the differentiation status of vM5LacZ-transduced hMPCs, we examined the reactivity of these cells with the SH2 antibody (Haynesworth et al., 1992), which was raised against culture-expanded hMPCs.

Preparation of ceramics and surgical implantation

Four- to six-week culture expanded, 3 × 10⁶ retrovirally transduced hMPCs selected in 0.5 mg/ml G418 (vM5LacZ- or vIL-3-SN-transduced hMPCs), or untransduced hMPCs (control hMPCs) were seeded into 3-mm porous titanium phos-

MATERIALS AND METHODS

Bone marrow harvest

B34 aspirates (10 ml from two 5-ml aliquots) were obtained from the posterior iliac crest of adults who had given informed consent under an IRB-approved protocol to the Hematology Stem Cell Facility of the Case Western Reserve University (Cleveland, Ohio). Although a small amount of peripheral blood typically is aspirated along with the marrow, the peripheral blood does not contain MPCs. All marrow samples were histologically normal.

Preparation and propagation of marrow-derived human MPCs

Preparation of the adherent marrow-derived cells has previously been described (Haynesworth et al., 1992a). Briefly, the gel-cell suspensions of bone marrow were layered on 70% (Sigma, St. Louis, MO) gradients and low-density mononuclear cells were recovered. Fifty × 10⁶ cells were plated in Dulbecco's modified Eagle's medium (DMEM) + 10% fetal bovine serum (FBS), preselected for growth and maintenance of the osteogenic potential of hMPCs, as described (Owen et al., 1991a; Lemons et al., 1993). On 100-mm² plastic dishes, culture dishes at 37°C, 5% CO₂. After 3 days, the medium was changed to serum nonadherent hematopoietic cells. Thereafter, the medium was changed twice weekly. Approximately 10–12 days after primary culture, the cells were detached from the plate with 0.25% trypsin containing 1 mM EDTA (GIBCO) for 5 min at 37°C. They were diluted 1:3 and cyclically replated in fresh medium when cells reached 80% confluence.

vM5LacZ and viral collection

vM5LacZ (also termed vM5Lac; Allay et al., 1993) contains the bacterial β -galactosidase (β -Gal) gene (LacZ) and the neomycin phosphotransferase gene (neo) both under the transcriptional control of the MOPSV 5' long terminal repeat (LTR) (kindly provided by W. Ouyang) as previously described by Chapp et al. (1993). Amphiprotic vM5LacZ producers were obtained by infecting GP + envA12 retroviral packaging cells (Markowitz et al., 1988) with supernatant from LacZ-expressing GP + E26 osteogenic cells (Chapp et al., 1993) using "piggyback" proviral amplification (Bodine et al., 1990), followed by G418 selection. A clone transmitting a high titer (1 × 10⁶ per CFU/ml) and β -Gal activity to NIH-3T3 was chosen and used in all subsequent gene transfer experiments.

vIL-3-SN

vIL-3-SN (kindly provided by Drs. D. Kahn and J. Nolin, USC) has previously been described (Nolin et al., 1994). Supernatant from vIL-3-SN producer cells was used in before GP + envA12 cells, which were then clonally expanded in GP + envA12 cells. Supernatant from a clone transmitting a titer of 3 × 10⁶ per CFU/ml was collected as described above and utilized for subsequent gene transfer experiments. Amphiprotic virus was collected every 18–24 hr for 6 consecutive days from producer cells when 80% confluent (Allay et al., 1995).

bars et al., 1991, 1992) tendon (Chapman et al., 1993), fibroblasts (Watanabe et al., 1995), and bone marrow stromal fibroblasts (Phadnis et al., 1990; Owen, 1993). The MPC is derived from the marrow stromal fibroblast population, but has been uniquely identified by its reactivity with a series of osteoblast antibodies, SH2, SH3, and SH4 (Haynesworth and Caplan, 1992), and by the capacity to differentiate into specific lineages as noted above. Although gene transduction of primary human MSCs has been described, few studies have addressed the use of primary human marrow-derived mesenchymal cells and no studies have demonstrated transduction of a putative phenotype following gene transfer into the transduced gene to be expressed (following differentiation *in vivo*, Nolin et al., 1994). Transduced human marrow cells with transgene (IL-3). In-duced into hematopoietic mice, and noted persistent IL-3 in the circulation. However, the osteogenic capacity of these cells and their fate *in vivo* were not determined. More recently, this group demonstrated the ability of IL-3-transduced control cells to enhance hematopoietic reconstitution (Owen, 1996).

MPCs are derived from low-density adherent BM fibroblasts that can be cultured expanded in culture from easily species, including rat (Owen et al., 1991a; Owen et al., 1991b; Owen et al., 1992), mice (Phadnis et al., 1990; Owen et al., 1991a; Owen et al., 1992), dogs (Phadnis et al., 1990; Owen et al., 1991a; Owen et al., 1992), and human (Phadnis et al., 1990; Owen et al., 1991a; Owen et al., 1992). MPCs isolated from a BM adherent cell population retain their undifferentiated and precursor phenotype during expansion, and differentiate into osteoblasts (Owen et al., 1993; Owen et al., 1994; Owen et al., 1995). Culture-expanded MPC populations seeded into porous calcium phosphate ceramic cubes and implanted subcutaneously in immunodeficient mice differentiated along the osteogenic lineage to form functional osteoblasts and osteocytes and, when densely packed, chondrocytes (Owen et al., 1991a; Owen et al., 1992; Owen et al., 1993). Bone formed within the ceramic is derived from the donor MPCs (Phadnis et al., 1990; Haynesworth et al., 1992a) and shows dynamic remission of normal bone development, including remodeling and the formation of a hematopoietic microenvironment *in vivo* (Owen et al., 1991a; Owen et al., 1992a). In addition, cytokines expressed by human MPCs (hMPCs) reveal characteristics of both stromal and osteogenic cells. Macrophage colony-stimulating factor (M-CSF), stem cell factor (SCF), IL-6, IL-11, and leukemia inhibitory factor (LIF) are constitutively produced in the supernatant of hMPC cultures and granulocyte colony-stimulating factor (G-CSF) and granulocyte-macrophage colony-stimulating factor (GM-CSF) can be induced by IL-1 (Owen et al., 1996). MPCs are also capable of supporting hematopoietic progenitors in long-term culture, as indicated by their stromal support (Owen et al., 1996). Thus, MPCs have capacity to be both osteogenic, chondrogenic, and supportive of hematopoietic cells as stromal elements of the marrow microenvironment.

We report that hMPCs transduced with a retroviral vector and cultured expanded for up to 6 weeks *in vitro* express the transduced gene products *in vitro* and *in vivo* and retain their ability to form bone *in vivo* when placed in an osteogenic ceramic cube microenvironment.

transcription both LTR-derived transcripts. As can be seen in Fig. 2A, vM5Lac2-transduced, G418-selected hMPCs remained a morphologically homogeneous population of fibroblastic cells, with dense areas of cells within the culture over-expressing LacZ, as indicated by blue staining after X-Gal exposure. The cells stained uniformly with SH2, a monoclonal antibody that selectively recognizes cultured hMPCs (Haynesworth and Caplan, 1992; Fig. 2B). Transduction efficiency was estimated by G418 resistance and X-Gal staining. In 9 separate experiments, a mean of 18 ± 4% of the cells stained blue compared to none of the nontransduced cells. To assess gene transfer (independent

vM5Lac2 transduction of hMPCs in vitro

First- or second-pass hMPCs were infected with vM5Lac2 and analyzed for transduction and expression of the LacZ and neo transcripts. A Northern blot of vM5Lac2 transduced G418 selected hMPCs (Fig. 1) identified both full-length 7.5-kb and spliced 2.5-kb viral transcripts at a ratio of 1:91. Thus, vM5Lac2-transduced hMPC cultures contain cells that

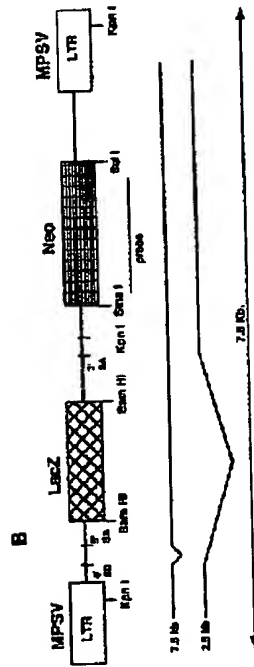
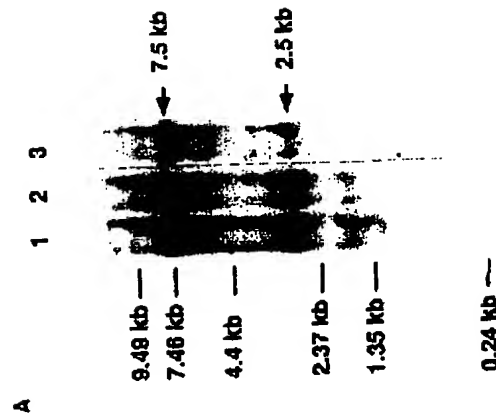


FIG. 1. vM5Lac2 expression in transduced hMPC in vitro. A. vM5Lac2-transduced hMPC grown in 0.5 mg/ml G418 were analyzed by Northern blot, which identified 1.9-fold greater expression of the full-length 7.5-kb transcript relative to the spliced 2.5-kb transcript by relative density. Lane 1, vM5Lac2-transduced hMPC from donor USN 461; lane 2, vM5Lac2-transduced hMPC from donor USN 473; lane 3, vM5Lac2-transduced NIH-3T3 cells. B. Map of the vM5Lac2 construct, indicating the full-length 7.5-kb and spliced 2.5-kb transcripts. The PCR-generated fragment within the neo coding region used as Northern probe is shown.

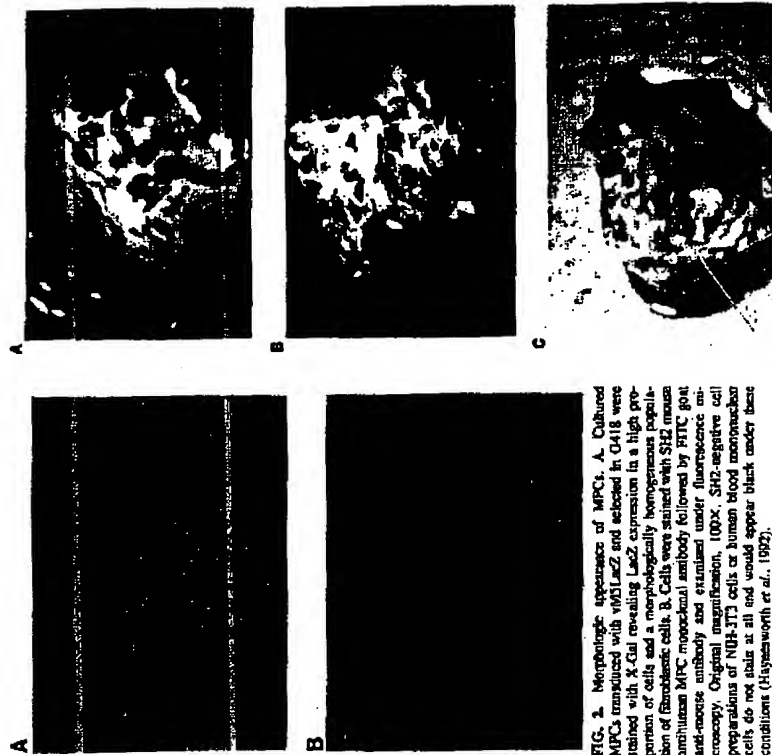


FIG. 2. Morphologic appearance of MPCs. A. Cultured MPCs transfected with vM5Lac2 and selected in G418 were stained with X-Gal revealing LacZ expression in a high proportion of cells and a morphologically homogeneous population of fibroblastic cells. B. Cells were stained with SH2 mouse anti-human MPC monoclonal antibody followed by FITC goat anti-mouse antibody and stained under fluorescence microscopy. Original magnification, 100X. SH2-negative cell preparations of NIH-3T3 cells or human blood mononuclear cells do not stain at all and would appear black under these conditions (Haynesworth et al., 1992).

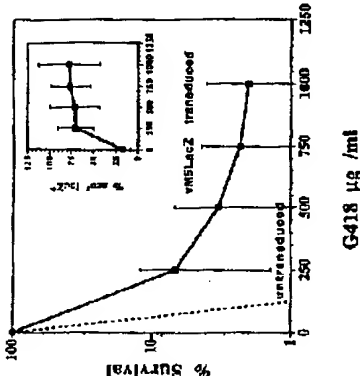


FIG. 3. G418 resistance and LacZ co-expression in vM5Lac2-transduced hMPCs in vitro. hMPCs were infected with vM5Lac2, plated in increasing concentrations of G418, and scored for clonal survival relative to an untransduced control culture of hMPCs. The inset indicates the proportion of X-Gal staining of colonies based on the same G418 dose range of the x axis. The curve shows the degree of LacZ and neo co-expression.

FIG. 4. Ceramic cubes after subcutaneous implantation. Porous calcium phosphate ceramic cubes were seeded with vM5Lac2-transduced or control hMPCs. Implanted subcutaneously in SCID mice, and sacrificed 6 weeks later. A. In the photomicrograph showing the extensive vascular network surrounding a ceramic seeded with vM5Lac2-transduced hMPCs. B and C. X-Gal stain of explant ceramic. Blue color indicates LacZ expression. B. Ceramic seeded with vM5Lac2-transduced MPCs stain blue. C. Ceramic seeded with untransduced hMPCs does not stain with X-Gal.

density of LacZ, we used G418 resistance, which measures functional expression of neo and expresses a lower level of transcription based on expression of neo at a sufficient level to result in G418 resistance, not retroviral gene transfer. Figure 3 shows that survival of vM1LacZ-transduced hMPCs placed in a critical density, indicating that approximately $7 \pm 5\%$ ($n = 9$ experiments) of the colonies survived 0.25 mg/ml G418 compared to none of the untransduced cells. The actual gene transfer rate was not determined at this point because it was difficult to isolate distinct colonies of cells for polymerase chain reaction (PCR) analysis of provirus, as is conventional, without some cross-contamination of the colonies with cells from adjacent colonies. Thus, the transduction efficiency is 18% by X-Gal staining for LacZ expression and 7% by G418 resistance as a measure of neo expression. The proportion of LacZ-expressing colonies was $70 \pm 28\%$ in cultures selected for G418 resistance (Fig. 3). These data imply indirectly that at least 5% of cells prior to selection expressed both LacZ and neo and that up to 13% of cells expressed detectable levels of LacZ but not neo. After neo selection, all cells were G418 resistant and, in this setting, most also expressed LacZ.

Maintenance of progenitor potential and gene expression in vM1LacZ-transduced hMPCs in vivo

vM1LacZ-transduced and untransduced hMPCs from the same donors were assayed in SCID mice for their potential to differentiate into bone-forming cells as described (Haynesworth et al., 1997). This model is different than the previously described infusion of marrow fibroblasts (Nora et al., 1994) in that an empty site was used to promote differentiation along the osteogenic lineage (Haynesworth et al., 1997). hMPCs seeded into osteogenic niches and implanted subcutaneously in CB17/SCID mice were analyzed. A total of 41 separate ceramic cubes were analyzed. A total of 7 different human donors. Thirty-two of these ceramics were seeded with vM1LacZ-transduced hMPCs (from all 7 donors), whereas 9 of these ceramics were seeded with untransduced (control) hMPCs (from 3 of the 7 donors).

Six and nine weeks after implantation, ceramics were recovered and examined histologically for bone and presence of LacZ⁺ cells. At both time points, macroscopic examination of the ceramics revealed a vascular network surrounding the implanted ceramic (Fig. 4A). After dissection from the host connective tissue, all ceramics were X-Gal stained. The pores of ceramics seeded with vM1LacZ-transduced hMPCs were a distinct blue, indicating the presence of LacZ⁺ cells, whereas ceramics

seeded with control hMPCs showed no color change (Fig. 4B, C).

Each ceramic was examined histologically, with a minimum of 24 sections per cube. None of the 5 ceramics seeded with vM1LacZ-transduced hMPCs showed any LacZ⁺ cells and none of the ceramics seeded with control hMPCs showed any LacZ⁺ cells (data not shown). Thus, bone formation within the ceramics (data not shown), confirming previous studies indicating the requirement for adherent hMPCs for bone formation to take place in this model (Goldman et al., 1991a,b; Dennis et al., 1992).

Bone formation and LacZ expression were evaluated in the ceramics after X-Gal staining, sectioning, and histological processing by counterstaining with Nuclear Red, Mallory's Heidenhain, or Hematoxylin and Eosin, some of which precluded identification of X-Gal-stained cells (the latter two counterstains turn X-Gal-stained cells a darker bluish-purple). In the 6-week group, bone was detected by Mallory's Heidenhain staining in 12 of 20 ceramics seeded with vM1LacZ-transduced hMPCs (derived from 3 of 7 donors) and 6 of 7 ceramics seeded with control hMPCs (derived from 2 of 3 donors). Analysis of paired hMPC ceramics from cultures of cells from 3 donors revealed that bone formation was observed consistently in implants from the same 2 of 3 donors, indicating that the osteogenic potential of hMPCs was not affected by vM1LacZ transduction. This degree of heterogeneity in bone formation has been previously noted (Goldman et al., 1991a,b; Dennis et al., 1992; Dennis et al., 1997).

In the 9-week group, bone was detected in 4 of 12 ceramics seeded with vM1LacZ-transduced hMPCs and 1 of 4 ceramics seeded with untransduced hMPCs. Among the ceramics studied, there were five paired sets from the same donors of vM1LacZ-transduced hMPCs transplanted at both 6 and 9 weeks. In the two sets, bone formation was detected in both 6 and 9 weeks. In two other sets, bone formation was not detected at either time.

Figure 5 shows photomicrographs of bone-containing ceramics seeded with vM1LacZ-transduced hMPCs (Fig. 5A-D) or control hMPCs (Fig. 5E,F). Osteoblasts were either cuboidal or fusiform cells at the edge of bone, whereas osteocytes were embedded within bony tissue. Figure 5, A-D, shows ceramics seeded with vM1LacZ-transduced hMPCs which contain X-Gal-stained blue LacZ⁺ osteoblasts and osteocytes encased within bone. Ceramics seeded with control hMPCs had no detectable X-Gal staining in sections counterstained with Nuclear Red. Hematoxylin and Eosin-stained sections are shown for ease of viewer observation (Fig. 5E,F). Many vM1LacZ-transduced hMPCs differentiated into osteogenic cells (Fig. 5A-D) and ex-

hibited LacZ⁺ expression and bone formation in vM1LacZ-transduced hMPCs. Ceramics were seeded with hMPCs and implanted in SCID mice. Mice were sacrificed and ceramics shown were harvested 6 weeks later. Ceramics in A-C, X-Gal-stained for expression of LacZ as described in Materials and Methods (desulfurized, embedded, sectioned, and counterstained as noted below, A-D) (pales A and B and C and D are each from the same cube) are from ceramics seeded with vM1LacZ-transduced hMPCs. E and F, Cubes coated with nontransduced hMPCs and lack progeny line the ceramic pores, form bone, and are supported by osteocytes within bone, whereas the centers of the pores consist of host-derived connective tissue and vasculature. A and C, Stained with Mallory's Heidenhain. B and D, Higher-power views of stiles counterstained with Hematoxylin and Eosin. They do not show evidence of LacZ⁺ expression. E and F, Higher-power views of stiles counterstained with Hematoxylin and Eosin. They do not show evidence of LacZ⁺ expression. Observations of the formation of bone in the cubes analyzed from cultures of transduced hMPCs. Original magnification: B, D, and F, 200 \times ; A, C, and E, 40 \times . Black arrow heads, macrophages; OB and black arrows, osteoblasts; F, fibroblast; V, vasculature.

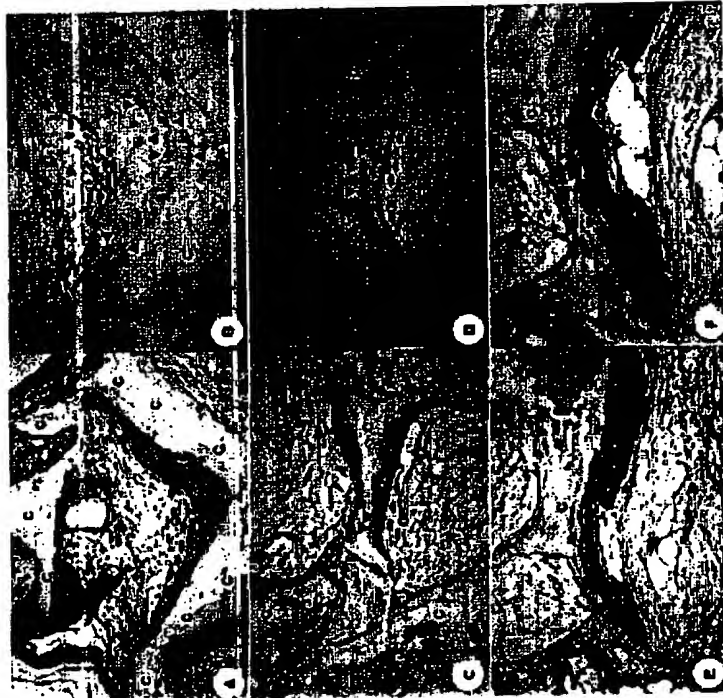


FIG. 5. See facing page for legend.



FIG. 6. Bone formation in a ceramic containing hMPCs transduced with IL-3. Ceramic cubes were coated with hMPCs transduced with vM1LacZ-IL-3 and implanted into NOD.LtH2.S6405d mice. At 9 weeks, cubes were recovered, fixed, sectioned, and stained with Mallory's Heidenhain. Bone formation is shown adjacent to the ceramic of one representative cube.

pressed LacZ by X-Gal stain. This suggests that hMPCs give rise to osteoblasts and osteocytes, as well as cells that may take a less mature phenotype or have yet to commit to a lineage. Most of the cells in the middle of the ceramic pores, not up against the ceramic, are host-derived connective tissue cells. However, an occasional X-Gal⁺ cell was noted within these spaces in cubes containing vM1LacZ-transduced hMPCs. Thus, there appears to be some ability of the ceramic-seeded cells to migrate into the ceramic space, although there was no evidence that a mature stromal space was generated.

TABLE 1. Bone Formation in Ceramic Cubes Seeded with Untransduced and IL-3-Transduced hMPCs

Mouse	Weeks after implantation						
	1	2	3	4	5	6	7
hIL-3/hMPC	OT13	OT13	OT10	OT13	OT10	OT10	OT10
hMPC	ND	OT1	OT1	OT1	OT1	OT1	OT1
No cells	OT1	OT1	OT1	OT1	OT1	OT1	OT1

Ratio of cubes containing bone to total cubes analyzed (five cubes per mouse).

IL-3 Expression in IL-3-Transduced hMPCs

To determine the potential for *in vivo* production of a secreted cytokine by hMPCs implanted in ceramic cubes, hMPCs were retrovirally transduced with the human IL-3 (hIL-3) cDNA. Data shown represent three independent transductions of hMPCs followed by coating of ceramic cubes and implantation into SCID mice. *In vitro* GP + rIL-3/IL-3 production was increased $1.9 \pm 0.0 \times 10^6$ pg of IL-3/ml per 10^6 cells per 24 hr, and IL-3-transduced, G418-selected hMPCs secreted $0.5 \pm 0.01 \times 10^6$ pg IL-3/ml per 10^6 cells per 24 hr. *In vivo* production and untransduced hMPCs secreted undetectable levels of hIL-3. IL-3-transduced hMPCs that were implanted in cubes for 6 weeks, seeded into ceramic cubes, and implanted subcutaneously in NOD/LSJ-seed mice retained their osteogenic potential. MPC-IL-3 from all donors harvested from ceramic cubes beyond 4 weeks were able to produce bone *in vivo* (Table 1 and Fig. 6).

All mice implanted with IL-3-transduced cells also received an infusion of 10^6 human cord blood cells to define whether the production of hIL-3 altered maintenance of human hematopoietic cells in the mice. IL-3 was detectable in the systemic circulation of mice up to 13 weeks after implantation. The mean level of plasma IL-3 in mice implanted with IL-3-MPCs was 48 ± 24 pg/ml (range 12–65 pg/ml, $n = 5$; Table 2). The mean IL-3 level in mice implanted with untransduced hMPCs was 1.4 ± 1.9 pg/ml (values, 0, 2.7 pg/ml, $n = 2$), whereas the IL-3 level in one mouse that was infused with human cord blood cells but was not implanted with hMPCs was 0.17 pg/ml. In both instances, this low level of IL-3 production was presumably derived from the T lymphocytes infused with the human hematopoietic cells. We were unable to evaluate whether IL-3 expression was occurring in the cells that formed

DISCUSSION

These data show that primary human marrow-derived mesenchymal progenitor cells capable of osteogenic differentiation

TABLE 2. IL-3 Levels in NOD/LSJ-Seed Mice Implanted with Ceramic Cubes Seeded with IL-3-Transduced hMPCs as a Function of Time

Mouse	Weeks after ceramic cube implantation						
	1	2	3	4	5	6	7
hIL-3/hMPC	45	ND	33.1	64.3	11.9	63.3	63.3
hMPC	ND	2.7	0	ND	ND	ND	ND
HSC	ND	ND	0.17	ND	ND	ND	ND
NOD/LSJ-seed/week	0						

NOD/LSJ-seed mice implanted ceramic cubes seeded with IL-3-transduced hMPCs and infused with human hematopoietic cells were sacrificed at the indicated times after implantation and the IL-3 plasma levels were quantified by ELISA as described in Materials and Methods. The mean level of IL-3 in these mice (47 ± 24 pg/ml) was higher than to 3 mice that received untransduced hMPCs with (2.7, 0 pg/ml) or without infusion of cord blood cells (0.17 pg/ml), $p < 0.05$.

MESENCHYMAL PROGENITOR GENE TRANSFER

In vivo can be retrovirally reinfused, culture expanded in G418 for up to 6 weeks, and continue to express genes of interest in mice while undergoing osteogenic differentiation for at least 12 additional weeks, or a total of 18 weeks after retroviral infection. These cells, termed hMPCs, because of their potential to differentiate along many mesenchymal lineages, were analyzed using the ability to form bone in the ceramic cube assay *in vivo* in SCID mice (Ogihara et al., 1991a,b; Dennis et al., 1992; Dennis and Caplan, 1998). Although retroviral infection of marrow derived human stromal cells has been described (Nelson et al., 1994), this is the first to document the ability of these cells to have osteogenic capacity *in vivo* after gene transfer. Fully differentiated osteocytes continued to express the proviral genes, indicating the permissive nature of transgene expression in these cells.

In these studies with the MPSV and LTRSV retroviral vectors, we have shown that both the latent and spliced proviral mRNA was produced and that both the osteogenic marker gene, *ost*, and the gene of interest, either LacZ or IL-3, could be expressed both *in vivo* and *in vitro*. The favorable transduction and expression frequency of marrow-derived hMPCs compared to many studies with hematopoietic progenitors, suggests numerous gene therapy applications. *In vivo*, transduced hMPCs continue expression of the LacZ gene 9 weeks after implantation into SCID mice. At 6 and 9 weeks, LacZ⁺ osteoblasts and osteocytes were detected by X-ray staining. Our laboratories have studied bone formation by hMPCs from multiple species in ceramics. Variability in the amount of bone produced has been observed in these studies and it is not uncommon for a portion of the cubes coated with the same hMPC preparation implanted into different SCID mice to contain no bone, presumably due to both host and donor factors. We are currently evaluating a quantitative measure for the amount of bone formed, but this assay is still being validated. Nonetheless, the amount of bone formation by transduced and non-transduced hMPCs appeared the same.

Since the *in vivo* "homing" of marrow-derived stromal cells is ill-defined, we used the ceramic cube model to verify that the transduced cells would persist *in vivo* and differentiate into bone-forming cells. Most studies suggest that the stroma retains its host origin after bone marrow transplantation (Simmons et al., 1987), in part because the cells appear "resistant" to pretransplant rejection and because so few stromal cells are actually transplanted. Keating et al. (1982) identified donor stromal cells (Adiclearin et al., 1987, 1989) have shown that a murine stromal cell line can assist reconstitution of lethally irradiated bone marrow, providing that "homing" can occur. In addition, Petráš et al. have shown that culture expanded murine BM-derived stromal cells have the potential for bone marrow engraftment when administered in a transplanted setting to irradiated recipients (Petráš et al., 1995).

Our model shows that transduction of hMPCs and subsequent implantation within an osteoconductive microenvironment is a mechanism for introducing cytokines *in vivo*. The cytokine genes in SCID mice are heavily vascularized so that the secreted product is not confined to the local environment but is able to reach the systemic circulation. The secretory capacity of hMPCs differentiating into osteoblasts could also be utilized in gene therapy. hMPCs transduced with IL-3 cDNA and placed within this microenvironment, secrete detectable

levels of IL-3 into the systemic circulation of the NOD/LSJ-seed mouse for 12 weeks. The experimental study was limited to IL-3 produced per cell was 3×10^{-4} pg/cell and is similar to the 2×10^{-4} pg/cell per cell reported after infusion of IL-3-transduced marrow stromal cells by Nishida et al. (1994), although the absolute serum levels are lower because the number of transduced cells was much lower.

These experiments were initially designed to recruit human hematopoietic cells into the space of the ceramic cube, thereby creating an ectopic human hematopoietic habitat. However, we were unable to identify such spaces biologically within the "humanized" ceramic cubes by CFU-GM testing even though the human CFU were recovered from the mouse marrow. Lack of success was either due to low levels of IL-3, the fact that the mice were not irradiated to enhance hematopoietic engraftment (Kawata et al., 1991; Kollman et al., 1994), or that the human hematopoietic cells could not home into the ectopic stromal and osteogenic space because connective tissue cells derived from the host filled the ceramic pores. It is also possible that the IL-3 production did not emanate from the ceramic cube-bound hMPCs. For instance, it is possible that the hMPCs within the cube were not producing the IL-3 either because the IL-3-producing cells migrated away from the ceramic or that the IL-3-expressing cells were unable to produce bone. However, there is no evidence that hMPCs have the ceramic, and all of the hMPCs coating the ceramics were selected for proviral integration and expression, thus all contained the IL-3 transgene. Because bone was observed in the ceramics, it would not appear that IL-3 production precluded bone formation. It is also possible that the IL-3 production was from the T cells infused from the cord blood cell preparation. However, in the 5 mice receiving hematopoietic cell infusion alone or with untransduced hMPCs, the levels of IL-3 ranged from 0 to 2.7 pg IL-3/ml, about 4% of the value seen in the mice receiving IL-3-transduced hMPCs. It is not surprising that the T cells would produce low levels of IL-3 in some mice but unlikely that they are the source of the high levels of IL-3 consistently observed in the mice containing ceramics with IL-3-transduced hMPCs. Thus, hMPCs appear to be the source of the IL-3 detected in these mice.

The ceramic cube setting creates an osteogenic environment for hMPC differentiation during which time gene expression continues. This could be used as a therapeutic strategy. Cytokines, angiogenesis factors, such as Fibroblast Growth Factor and IL-3, and hormones could be expressed from bone-forming cells in some settings. Cells in cubes could be implanted and later removed so that delivery of a gene product could be regulated. hMPCs administered in ceramic cubes did bone grafting and these cells could be transduced to express proteins that enhance bone healing while reducing the inflammatory response (Caplan et al., 1993). A number of gene defects could be corrected in hMPCs, which are then administered to specific mesenchymal sites, where they would be predicted to differentiate down defined lineages. In particular, osteogenesis imperfecta type I (OI type I), which is characterized by brittle bones, is the manifestation of a defect in the amount of type I collagen resulting from a functional deletion of the *pro α 1(I)* gene (Bianchi et al., 1985). Retroviral transduction of hMPCs, like that reported for fibroblasts derived from a murine model of OI type I (Fameli et al., 1993; Harbers et al., 1994) could produce increased levels

of increased type I collagen (Stacy et al., 1997) and, because of their osteogenic potential, become reduced in the bone. Consideration of the CII defect would be more complex because mixtures of normal and abnormal collagen remain biologically abnormal although these may be potential benefit compared to the pure OI-derived collagen (Barb et al., 1993).

In summary, transduction of MSCs may expand the repertoire of normal, primary cells amenable to *ex vivo* gene therapy with applications in any setting in which reconstitution of mesenchymal tissues is contemplated.

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REFERENCES

- ALLAY, J., DUMENCO, L., KOC, O., LILI, L., and GERSON, J. (1997). Bone marrow transplantation and expansion of the human adult osteoblast cDNA provides osteogenic resistance to hematopoietic cells. *Blood* 85, 3402-3411.
- ANGELBERG, P., EASE, K., GLOWACKI, J., HOLLAND, C., SARAKENY, M., WRIGHT, J., FITZGERALD, T., LEE, C., and GREENBERG, J. (1997). Disruption of a clonal bone marrow stromal cell line *in vivo* stimulates hematopoietic recovery from total body irradiation. *Proc. Natl. Acad. Sci. USA* 94, 1764-1768.
- ANGELBERG, P., FITZGERALD, T., EASE, K., OHARA, A., and GREENBERG, J. (1998). Improved hematopoiesis in severe SCID mice by stromal and therapeutic transplantation of a hematopoietic microenvironment. *Blood* 91, 1144-1151.
- BAB, I., PALSH-SEVEN, L., GAZIT, D., SEKELER, B., ASHTON, B., PEYLAN-RAMU, N., ZIV, T., and ULMANSKY, M. (1998). Osteogenesis *in vivo* after retrovirus-mediated gene transfer to bone marrow cells. *Bone* 23, 377-386.
- BAB, I., ROUSH, C., BONADRA, J., BYERS, P., and GELINAS, R. (1993). Retroviral-mediated transduction may cause a deletion in $\alpha 1(I)$ collagen chain in a lethal form of osteogenesis imperfecta. *Proc. Natl. Acad. Sci. USA* 90, 2870-2874.
- BAUD, C., FORSTER, P., HEDERWICH-SCHNEIDER, S., and BARBER, R. (1994). An optimized retroviral protocol applicable to a wide range of cell lines. *Biochemicals* 17, 1028-1031.
- BELOTTI, J.W., MACDONALD, G.B., WAGNER-SMITH, Z., FLETCHER, P.A., MOORE, E.A., HAVENS, D., VALLALON, D., CHANG, J.M., and CASEY, C.T. (1998). Expansion of human osteoblasts in mouse hematopoietic cells. *Mol. Cell Biol.* 18, 3116-3125.
- BOLOTIN, E., NOLTA, J., SMITH, S., DAO, M., WEINBERG, K. (1995). Gene therapy with marrow stroma transduced with IL-7 gene rapidly after murine bone marrow transplant. *Blood* 85, 1518.
- BOONDE, D.M., MCDONNELL, E.T., BRANDT, S.J., NETY, P.A., AGHOLLA, B., STYING, B., and WEINBERG, A.W. (1990). Development of a long-term retrovirus producer cell line capable of gene transfer into mouse hematopoietic stem cells. *Proc. Natl. Acad. Sci. USA* 87, 3738-3742.
- BRUDEN, B., JANSZWI, N., and HAYNESWORTH, S. (1997). Growth kinetics, self-renewal and the osteogenic potential of purified human mesenchymal stem cells during extensive subcultures and following cryopreservation. *J. Cell Biochem.* 64, 237-244.
- CAPLAN, A.L., FINE, D.J., GOTO, T., LINTON, A.E., YOUNG, R.G., WATKINS, A.L., CHEN, J., and HAYNESWORTH, S. (1997). Mesenchymal stem cells and their progeny. In *The Arteriosclerotic Lesion: Current and Future Concepts* (D.W. Jacobs, ed.). Raven Press, Ltd., New York, pp. 405-417.
- CLAPP, D., FREIER, B., SUDER, E., YOUNG, R., FORTNEY, K., and GERSON, S. (1995). Mesenchymal stromal cells derived from expression of β -galactosidase following retroviral transduction of murine hematopoietic cells. *Exp. Hematol.* 23, 630-638.
- COUGNOYER, D., SCARPA, M., MOTANI, R., MOORE, K., MARKOWITZ, D., BAYNE, A., BELMONT, J., and CASEY, C. (1997). Gene transfer of osteogenic resistance into primitive human hematopoietic progenitor cells. *Bone* 20, 202-213.
- DENNIS, J., and CAPLAN, A. (1998). Analysis of the developmental potential of mesenchymal stromal cells derived from marrow progenitor cells isolated from the F-436-3438 transgenic mouse. *Cell Tissue Res* 74, 93-99.
- DONNER, J., HAYNESWORTH, S., YOUNG, R., and CAPLAN, A. (1992). Osteogenesis in marrow-derived mesenchymal cell pellets: bone matrix components, osteoblast differentiation, effects of growth factors on cell attachment and rate of osteogenic expansion. *Cell Transplantation* 1, 23-34.
- FRIEDENSTEIN, A. (1976). Precursor cells of mechanocytes. *Int. Rev. Cytol.* 47, 207-313.
- FRIEDENSTEIN, A. (1980). Strong mechanisms of bone marrow: Cloning *in vitro* and reimplantation *in vivo*. In *Immunobiology of Bone Marrow Transplantation* (Berth, Springer-Verlag) pp. 19-32.
- FRIEDENSTEIN, A., CHARLAKIAN, R.K., and LALYKINA, E. (1970). The development of fibroblast colonies in mesenchymal cells of pooled $\phi 6$ bone marrow and spleen cells. *Cell Tissue Res* 3, 373-403.
- GERSON, S., L., RAY, K., BERGER, N.A. (1985). Osteogenic potential of marrow-derived cells. *J. Clin. Invest.* 76, 2106-2116.
- GOLING, D., HOCKING, W., QUAN, S., SPARKES, R., and GALL, R. (1990). Origin of the human bone marrow fibroblast. *Br. J. Haematol.* 64, 183-187.
- GOSHIMA, J., GOLDBERG, V., and CAPLAN, A. (1991a). Osteogenic potential of culture-expanded rat marrow cells: *in vivo* assay with porous calcium phosphate ceramic. *Biomaterials* 12, 257-258.
- GOSHIMA, J., GOLDBERG, V., and CAPLAN, A. (1991b). The osteogenic potential of culture-expanded rat marrow mesenchymal cells: *in vivo* assay in calcium phosphate ceramic blocks. *Cell. Orthop.* 283, 289-311.
- GOSHIMA, J., GOLDBERG, V., and CAPLAN, A. (1991c). The origin of bone formed in composite grafts of porous calcium phosphate ceramic loaded with marrow cells. *Cell. Orthop.* 283, 314-321.
- GVERNER, D.L., SHULTZ, L.D., YATES, J., APPEL, M.C., PERDRETT, G., HERSHLETON, B.M., SCHWEITZER, T., BEAMER, W.C., SHULTZ, K.L., and PELSVE, S.C. (1995). Am. J. Pathol. 146, 883-890.
- HARRIS, K., FURMAN, M., DELOS, R., and HARRIS, R. (1994). Isolation of retrovirus from the first passage of mixed culture of marrow and marrow stroma. *Proc. Natl. Acad. Sci. USA* 91, 1360-1363.
- HAYNESWORTH, S.E., and CAPLAN, A.L. (1997). Cell surface antigens on human marrow-derived mesenchymal cells are detected by monoclonal antibodies. *Bone* 19, 68-69.
- HAYNESWORTH, S.E., GOLDBERG, V.M., and CAPLAN, A.L. (1997). Characterization of cells with osteogenic potential from human marrow. *Bone* 19, 81-88.
- HAYNESWORTH, S.E., BARBER, M., and CAPLAN, A.L. (1996). Cy-

tokine expression by human marrow-derived mesenchymal progenitor cells *in vitro*: Effects of dexamethasone and E-12. *J. Cell Physiol.* 166, 383-392.

HOOGE, D.E., and HAYNESWORTH, S.E. (1997). Gene transfer to *ex vivo* derived and transplanted human mesenchymal progenitor cells using recombinant adenovirus. *Blood* 89, 811-817.

HOOGE, P., YATES, C., HOOGE, D., and HAYNESWORTH, S. (1999). High-efficiency gene transfer to human mesenchymal cells utilizing lentiviral marrow culture. *Bone* 24, 691-692.

HUMANSON, G. (1973). *Animal Tissue Techniques*. (San Francisco, W.H. Freeman) pp. 179-185.

JANUSCH, R., HARRIS, K., SCHNEIDER, A., LÖHNER, J., GELBER, M., JANUSCH, D., GELBER, D., and HOFFMANN, B. (1995). Gene transfer of osteogenic resistance into primitive human hematopoietic progenitor cells. *Bone* 20, 202-213.

KEATINGE, A., SHORR, J., KILLEN, P., STRIKER, G., SALO, A., SANDERS, J., THOMAS, E., THORNTON, D., and RALLKOP, P. (1992). Bone origin of the *in vitro* hematopoietic microenvironment. *Transplantation* 54, 280-283.

KOLLMANN, T., KIM, A., ZHANG, X., HACHAMOVITZ, M., and GOLDBERG, B. (1994). Reconstitution of SCID mice with human lymphoid and myeloid cells after transplantation with fetal bone marrow without the requirement for exogenous human cytokines. *Proc. Natl. Acad. Sci. USA* 91, 8077-8080.

KROTH, S., SARIN, S., NAKAGAWA, R., MCGUIN, J., and KAMBERHAIN, H. (1991). Human T cells in the SCID-hg mouse: phenotypically normal and functionally competent. *J. Immunol.* 146, 3751-3758.

LAZARUS, H.L., HAYNESWORTH, S., GERSON, S.L., and CAPLAN, A.L. (1997). Human bone marrow-derived mesenchymal (stromal) progenitor cells cannot be recovered from peripheral blood progenitor cell collections. *J. Hematotherapy*, in press.

LAVIE, J., JANUSCH, K., O'REILLY, R., and CASTRO-MALASPINA, H. (1997). Role of the human hematopoietic microenvironment following allogeneic bone marrow transplantation. *Blood* 71, 1666-1668.

LENNON, D., HAYNESWORTH, S., YOUNG, R., DENNIS, J., and CAPLAN, A. (1993). A chemically defined medium supports *in vitro* proliferation and maintains the osteogenic potential of rat marrow-derived mesenchymal stem cells. *Exp. Cell Res.* 218, 211-222.

LIM, B., WILLIAMS, D., and GERSON, S. (1997). Retrovirus-mediated gene transfer of human osteoblast differentiation gene sequences to marrow cells in murine hematopoietic stem cells *in vivo*. *Mol. Cell Biol.* 17, 3479-3485.

MARKOWITZ, D., COOP, S., and BANK, A. (1988). Construction and use of a safe and efficient retrovirus packaging cell line. *J. Virol.* 62, 400-406.

MCVITTLOCK, C., STRUBER, M., HUGHES, P., WELCHER, A., and ALBIN, J. (1991). Osteogenic progenitor cells in rat bone marrow stromal populations exhibit self-renewal in culture. *Blood* 77, 906-911.

MCVITTLOCK, C., JOHNSON, M.J., MILLER, A.D., FITZ, S., WILLIAMS, S.E., VALLEJO, D., MARTIN, D.W., JR., and WILLIAMS, D. (1997). Human bone marrow stromal progenitor cells: Osteogenic differentiation, gene transfer into cultured cells and murine hematopoietic stem cell by using recombinant adenoviral retrovirus. *Mol. Cell Biol.* 17, 338-346.

MATONDAE, M.P., HAYNESWORTH, S.E., THIBODE, M.A., MARSHALL, D.R., CAPLAN, A.L., and GERSON, S.L. (1993). Culture expanded human mesenchymal stem cells (MSC) express cytokines and support hematopoiesis *in vitro*. *Blood* 86, 494.

METCALF, D., and MCCOY, N. (1983). Tissue localization and role in mice of isolated multipotential colony-stimulating factor. *Proc. Natl. Acad. Sci. USA* 80, 3100-3104.

MAKISHIMA, H., OHLBERG, V., and CAPLAN, A. (1991). Osteogenic potential of human marrow-derived cells: establishment and characterization of a cell line. *J. Cell Physiol.* 149, 465-478.

MAKISHIMA, H., OHLBERG, V., and CAPLAN, A. (1992). Establishment of a cell line from human marrow-derived cells: characterization of a cell line. *J. Cell Physiol.* 150, 391-398.

MATONDAE, M.P., HAYNESWORTH, S.E., THIBODE, M.A., MARSHALL, D.R., CAPLAN, A.L., and GERSON, S.L. (1993). Culture expanded human mesenchymal stem cells (MSC) express cytokines and support hematopoiesis *in vitro*. *Blood* 86, 494.

METCALF, D., and MCCOY, N. (1983). Tissue localization and role in mice of isolated multipotential colony-stimulating factor. *Proc. Natl. Acad. Sci. USA* 80, 3100-3104.

PERDRETT, G., JOHNSON, M.J., MILLER, A.D., FITZ, S., WILLIAMS, S.E., VALLEJO, D., MARTIN, D.W., JR., and WILLIAMS, D. (1997). Human bone marrow stromal progenitor cells: Osteogenic differentiation, gene transfer into cultured cells and murine hematopoietic stem cell by using recombinant adenoviral retrovirus. *Mol. Cell Biol.* 17, 338-346.

MATONDAE, M.P., HAYNESWORTH, S.E., THIBODE, M.A., MARSHALL, D.R., CAPLAN, A.L., and GERSON, S.L. (1993). Culture expanded human mesenchymal stem cells (MSC) express cytokines and support hematopoiesis *in vitro*. *Blood* 86, 494.

METCALF, D., and MCCOY, N. (1983). Tissue localization and role in mice of isolated multipotential colony-stimulating factor. *Proc. Natl. Acad. Sci. USA* 80, 3100-3104.

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